PART B - FEE(S) TRANSMITTAL omplete and sepd this form, together with applicable fee(s), to: <u>Mail</u> Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 APR 18 2006 Alexandria, Virginia 22313-1450 (571) 273-2885 or <u>Fax</u> INTRUCTIONS: The form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate All forms correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated the process of the process maintenance fee notifications CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 24374 01/13/2006 7590 Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. VOLPE AND KOENIG, P.C. DEPT. ICC UNITED PLAZA, SUITE 1600 30 SOUTH 17TH STREET PHILADELPHIA PA 19103 04/19/2006 RMEBRAHI 00000077 090435 Anthony L_{ullet} Venezia (Depositor's name 10822502 (Signature) 01 FC:1501 1400.00 DA 13 (Date April 2006 300.00 DA 02 FC:1504 03 FC:8001PLICATION No.00 DA FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO 10/822,502 04/12/2004 Arty Chandra I-2-0341.2US 3042 TITLE OF INVENTION: USER EQUIPMENT (UE) ASSISTED SYSTEM DATABASE UPDATE APPLN. TYPE SMALL ENTITY **ISSUE FEE PUBLICATION FEE** TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 \$300 \$1700 04/13/2006 **EXAMINER** ART UNIT CLASS-SUBCLASS GELIN, JEAN ALLAND 2688 455-436000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Volpe and Koenig, P.C. (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) InterDigital Technology Corporation Wilmington, DE

Please check the appropriate assignee category or categories (will not be	pe printed on the patent): 🔲 Individual 🍄 Corporation or other private group entity 🔲 Government			
4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):			
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5. Change in Entity Status (from status indicated above)				
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).			
The Director of the USPTO is requested to apply the Issue Fee and Pub NOTE: The Issue Fee and Publication Fee (if required) will not be accounterest as shown by the records of the United States Patent and Traden	olication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. expled from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in mark Office.			
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Registration No.

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the P ork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number BADEMAS Complete if Known suant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **Application Number** 10/822,502 FEE TRANSMIT Filing Date April 12, 2004 For FY 2006 First Named Inventor Chandra et al. **Examiner Name** Jean Alland Gelin Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2688 TOTAL AMOUNT OF PAYMENT 1712 Attorney Docket No. I-2-0341.2US **METHOD OF PAYMENT** (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 09-0435 Deposit Account Name: InterDigital Communications Corporation For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES EXAMINATION FEES Small Entity** Small Entity **Small Entity Application Type** Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 200 250 100 Design 200 100 100 130 50 65 200 Plant 100 300 150 160 80 Reissue 300 150 500 600 250 300 Provisional 200 100 0 0 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee Description Fee (\$) Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 360 180 Multiple dependent claims **Total Claims Extra Claims** Multiple Dependent Claims Fee (\$) Fee Paid (\$) Fee (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims **Extra Claims** Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Extra Sheets Number of each additional 50 or fraction thereof Fee Paid (\$) Total Sheets / 50 = (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Issue Fee, Publication Fee and Four (4) advance soft copies 1712

SUBMITTED BY	<u> </u>		-
Signature	W	Registration No. (Attorney/Agent) 48,382	Telephone 215-568-6400
Name (Print/Typ	e) Anthony L. Venezia		Date April 13, 2006

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ENAM			Application Number	10/822	2,502	
	RANSMITTAL		Filing Date	April 1	2, 2004	
	FORM		First Named Inventor	Chand	Ira et al.	
			Art Unit	2688		
(to be used for	r all correspondence after initial i	filina)	Examiner Name	Jean A	Jean Alland Gelin	
	of Pages in This Submission	<i>g</i> /	Attorney Docket Number	I-2-034	41.2US	
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Amendm A A Extension Express Informati Certified Documer Reply to Incomple	nsmittal Form Fee Attached nent/Reply After Final Affidavits/declaration(s) on of Time Request Abandonment Request ion Disclosure Statement Copy of Priority nt(s) Missing Parts/ ete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53		Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocati Change of Correspondence Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on Corks	Address	After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): Form PTOL-85	
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Firm Name	VOLPE AND KOENI	G, P.C.				
Signature	av	~				
Printed name	Anthony L. Venezia					
Date	April 13, 2006			Reg. No.	48,382	
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Anthony L. Venezia

Date

April 13, 2006